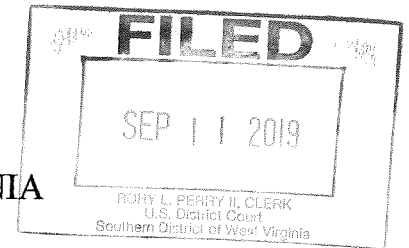


UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF WEST VIRGINIA



Fred L Badger

03694-088

(Enter above the full name of the plaintiff  
or plaintiffs in this action).

(Inmate Reg. # of each Plaintiff)

**VERSUS**

**CIVIL ACTION NO.** 2:19-cv-00653  
(Number to be assigned by Court)

SCRT  
1001 Centre Way  
South Charleston WV  
25309

(Enter above the full name of the defendant  
or defendants in this action)

**COMPLAINT**

**I. Previous Lawsuits**

A. Have you begun other lawsuits in state or federal court dealing with the same facts involved in this action or otherwise relating to your imprisonment?

Yes \_\_\_\_\_

No ✓

- B. If your answer to A is yes, describe each lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same outline).

1. Parties to this previous lawsuit:

Plaintiffs: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Defendants: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

2. Court (if federal court, name the district; if state court, name the county);

Southern District of West  
Virginia

3. Docket Number: 2:06-cr-00173-1

4. Name of judge to whom case was assigned:

Judge Copenhaver

5. Disposition (for example: Was the case dismissed? Was it appealed? Is it still pending?)

Sentenced to 92 months

6. Approximate date of filing lawsuit: 8-27-19

7. Approximate date of disposition: 9-12-19

II. Place of Present Confinement: SCRT

A. Is there a prisoner grievance procedure in this institution?

Yes ✓ No       

B. Did you present the facts relating to your complaint in the state prisoner grievance procedure?

Yes ✓ No       

C. If your answer is YES:

1. What steps did you take? I contact kitchen,

US marshalls, Counselor Oxley  
Randy over religions

2. Randy over religions  
What was the result? No attempts was

2. What was the result? No attempts was

made for food (Kosher or Services

D. If your answer is NO, explain why not: They continue

to issue the same meals and prevent me from services.

prevent me from Services.

### III. Parties

(In item A below, place your name and inmate registration number in the first blank and place your present address in the second blank. Do the same for additional plaintiffs, if any.)

A. Name of Plaintiff: Fred L Badger 03694-088

Address: 1001 Centre Way, Charleston WV  
25305

B. Additional Plaintiff(s) and Address(es): \_\_\_\_\_

(In item C below, place the full name of the defendant in the first blank, his/her official position in the second blank, and his/her place of employment in the third blank. Use item D for the names, positions, and places of employment of any additional defendants.)

C. Defendant: Superintendent Roberts  
is employed as: As the Warden  
at SCRT

D. Additional defendants: Food Services,  
And Chapel Religious  
Department

#### IV. Statement of Claim

State here as briefly as possible the facts of your case. Describe how each defendant is involved. Include also the names of other persons involved, dates and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

I am a Hebrew Israelite/Jewish  
inmate. I am restricted to dietary  
meal pertaining to kosher meal  
and religious services. I am  
also not issued religious material,  
grape juice, nor Matza Crackers.  
I am not authorized a place to  
worship. No Rabbi or a time to

**IV. Statement of Claim (continued):**

to practice CFR 548.10  
Allows me practice and meals  
in which this facility will not  
allow. Federal marshalls  
informed them, courts informed  
them and they still refuse  
me. Under my rights to  
Freedom of Religion they  
offer me no rights.

**V. Relief**

State briefly exactly what you want the court to do for you. Make no legal arguments.  
Cite no cases or statutes.

I would like for this court  
to make them provide me  
kosher meals, Time to practice,  
may motza crackers and juice  
to practice my traditional  
ceremonies on the prescribe  
day.  
I would like to be  
give my religious holidays,

V. Relief (continued)):

They prohibited me from my  
passover, feast of unleaven bread,  
day of atonement. I am  
also ~~ask~~ asking for compensation  
in the sum of 3 million dollar

VII. Counsel

- A. If someone other than a lawyer is assisting you in preparing this case, state the person's name:

\_\_\_\_\_

- B. Have you made any effort to contact a private lawyer to determine if he or she would represent you in this civil action?

Yes \_\_\_\_\_

No ☒

If so, state the name(s) and address(es) of each lawyer contacted:

\_\_\_\_\_

\_\_\_\_\_

If not, state your reasons: \_\_\_\_\_

\_\_\_\_\_

- C. Have you previously had a lawyer representing you in a civil action in this court?

Yes \_\_\_\_\_

No ☒

If so, state the lawyer's name and address:

\_\_\_\_\_  
\_\_\_\_\_

Signed this 27 day of August, 2019.

Fred L Badger

02694-088

\_\_\_\_\_  
Signature of Plaintiff or Plaintiffs

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 8-27-19  
(Date)

Fred L Badger

Signature of Movant/Plaintiff

\_\_\_\_\_  
Signature of Attorney  
(if any)